

NOTE BOOK
FOR CASES OF
OVARIAN AND OTHER ABDOMINAL TUMORS.

BY

WM. H. HINGSTON, M.D., D.C.L., L.R.C.S., EDIN.,

SURGEON TO HOTEL-DIEU,

PROFESSOR OF CLINICAL SURGERY MONTREAL SCHOOL OF MEDICINE;
CONSULTING SURGEON TO WOMAN'S HOSPITAL, ETC., ETC.

MONTREAL:
DAWSON BROTHERS.
1882.

Can. Huntington
Parr. William H.

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P R E F A C E .

THIS NOTE BOOK, though fuller than, will be found to resemble, in many respects, that of Dr. Spencer Wells, to whom is due the credit of having first recommended the use of a separate pamphlet in each case. The order of arrangement in Dr. Hodges' excellent Note Book has been followed. But I have added, under the head of Diagnosis, chiefly, many important questions not heretofore recorded, attention to which, will, it is hoped, aid the practitioner to avoid error by suggesting to him its possible sources.

37 UNION AVENUE,

20th November.



GENERAL CONDITION.

NUMBER.

1. DATE OF EXAMINATION.

2. NAME.

3. ADDRESS.

4. AGE, NATIONALITY,

5. WHERE BORN ?

6. WHERE HAS SHE LIVED ?

7. OCCUPATION.

8. USUAL MEDICAL ATTENDANT.

9. (a) Married ? (b) When married ? (c) Single ?

10. HAS HAD HOW MANY CHILDREN ?

11. Respective ages.

12. ANY DIFFICULT LABOR ?

13. ABORTIONS ?

14. HOW INDUCED ?

15. WIDOW. When did Husband die ?

16. HABITS. $\left\{ \begin{array}{l} (a) \text{ Active.} \\ (b) \text{ Sedentary.} \end{array} \right.$

GENERAL APPEARANCE.

17. Complexion.

18. Expression of face.

19. Emaciation

20. POSTURE,	}	Easiest.	}	(a) In bed.
				(b) Out of bed.
	}	Least	}	(a) In bed.
		comfortable.		(b) Out of bed.

RESPIRATORY ORGANS.

21. Breathing.

22. Cough.

23. Expectoration.

24. Percussion.

25. Auscultation.

CIRCULATION.

26. Pulse-Rate and Character.

27. Allowance for anxiety during examination?

HEART.

28. Percussion.

29. Auscultation.

DIGESTIVE ORGANS.

30. Tongue.

31. Appetite.

32. Thirst. Amount of fluid taken daily.

33. Temperature of mouth.

34. Flatulence.

35. Nausea.

36. Action of bowels.

NERVOUS SYSTEM.

37. Sleep.

38. Pain.

39. In Occipital Region.

40. Hysteria.

41. Condition of mind.

URINARY ORGANS.

42. Frequency of urination.

43. Incontinence.

44. Dysuria.

URINE.

45. Color.

46. Odor.

47. Quantity in 24 hours.

48. Specific gravity.

49. Acid or alkaline.

50. Albumen.

51. Sugar.

52. Deposits.	{	Inorganic.
		Organic.
		Blood.
		Pus.
		Epithelium.
		) Tube Casts.

GENITAL ORGANS.

53. When last menstruated.

54. Age at which menses began.

55. Age at which menses ceased.

56. Any sudden suppression.

57. Normal in quality & quantity.

58. Excessive or deficient menstruation.

59. Painful menstruation.

60. Leucorrhœa or other discharges.

SKIN.

61. Temperature.

62. Cutaneous exhalation.

63. Eruptions.

64. Ulcers.

65. Edema.

66. Varicose veins.

67. LYMPHATIC GLANDS, Condition of

HISTORY.

68. Hereditary influence.

69. Previous diseases.

70. Accidents.

71. Moral causes.

72. Discovery of tumor, time of.

73. Where did it begin?

- 74. Rate of increase ;—rapid or slow.
- 75. Regular or otherwise.
- 76. Diminution at any time.
- 77. Pain or tenderness at any time in Abdomen.
- 78. In Groin or pubic region.
- 79. Irritable Bladder.
- 80. Mammary pains.
- 81. Nausea.
- 82. Movements felt in tumor or in Abdomen.
- 83. Changes in position of tumor.
- 84. Febrile attacks.

85. Discharges. } Through Uterus.
 } Vagina.
 } Abdominal Wall.
 } Bladder.
 } Bowel.

86. Serious or alarming symptoms at any time.

87. Strength, as indicated by ability to walk, etc.

TREATMENT HERETOFORE.

88. Medical.

89. Surgical.

90. Date of tapplings.

91. Quantity of fluid removed.

92. Character of fluid.

93. Other operations.

LOCAL EXAMINATION.

INSPECTION OF ABDOMEN.

- 94. Enlargement, general or partial?
- 95. Symmetrical or irregular?
- 96. Umbilicus depressed or prominent?
- 97. Any changes in appearance of skin?
- 98. Linea alba changed in color?
- 99. Are Veins enlarged?

PALPATION OF ABDOMEN.

- 100. Any tenderness on touch?

101. Has tumor definite outline?
102. Is it hard, soft, or elastic?
103. Do abdominal walls glide over it?
104. Are abdominal walls thin or thick?
105. Is pulsation of Aorta felt?

PERCUSSION.

SOUNDS AT UMBILICAL REGION.

106. When lying on back.
107. When lying on right side.
108. When lying on left side.
109. When sitting or standing.

At Epigastric Region.

110. When lying on back.

111. When sitting up.

At Lumbar Regions,

112. Right.

113. Left.

114. How affected by change of position.

At Hypogastric Region.

115. Dull or resonant.

Percussion on the several parts of the tumor.

116. When lying.

117. When sitting or standing.

118. Percussion Sounds between above regions.

FLUCTUATION.

119. Distinct or obscure.

120. In all, or part of tumor.

121. Limited, and in sections, or extensive.

AUSCULTATION.

122. Gurgling of intestines.

123. Crepitus.

124. Placental Souffle.

125. Fœtal Heart.

126. Aneurismal murmur.

MAMMARY GLANDS.

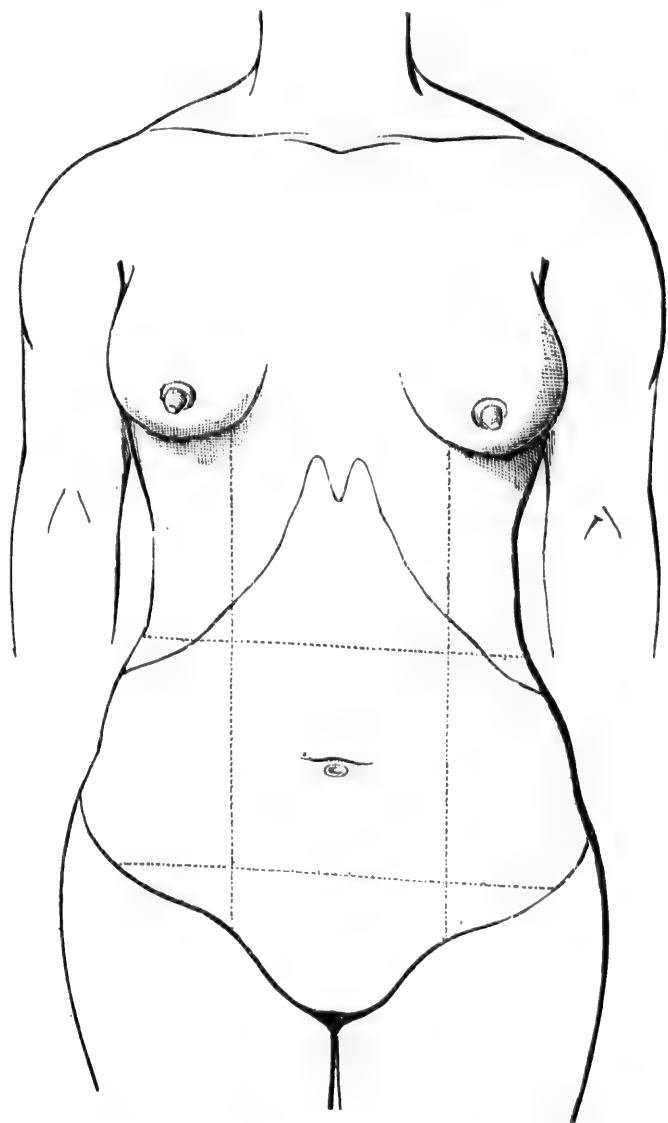
127. Enlargement.

128. Sensibility.

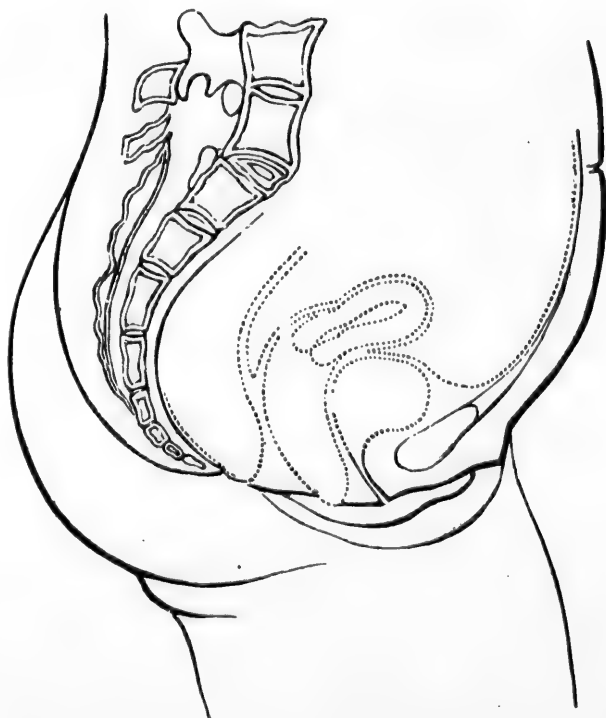
129. Areola,

130. Papillae.

131. Secretion.



MEASUREMENTS,	INCHES.
132. Around body at umbilicus,	"
133. Greatest circumference, above or below umbilicus .	"
134. From ensiform cartilage to umbilicus,	"
135. From symphysis pubis to umbilicus,	"
136. From right ant. sup. sp. pro. of ilium to umbilicus. "	
137. From left ant. sup. sp. pro. of ilium to umbilicus. "	



VAGINA.

138. Where can tumor be felt?

139. Can fluctation be detected?

140. Vaginal fulness.

141. Vaginal Hue

UTERUS.

142. Position.

143. Deviations.

144. Mobility.

145. Attachments to tumor.

146. Condition of Os and Cervix.

147. Ballottement.

148. Length of cavity.

Measured by sound if no reason to suspect pregnancy.

ANUS AND RECTUM.

149. Hæmorrhoids.

150. Can tumor be felt?

151. Can it be separated from parts behind?

152. Can fluctuation be detected?

EXAMINATION BY ASPIRATION OR TAPPING.

153. Quantity of fluid, if any, removed.

154. Color, density, tenacity, etc.

155. Specific gravity.

156. Albumen.

157. Microscopical appearances.

DIAGNOSIS.

158. Is the enlargement within the abdominal cavity ?

159. Is it solid or fluid ?

160. Does it contain liquid or gas, or both ?

161. Is liquid thin or thick ?

162. Is there any pus ?

163. Tympanites.

164. Ascites.

165. Distention of urinary bladder.

166. Diseased condition of pelvic bones.

167. Pelvic or psoas abscess ; or pelvic tumor.

168. Retention of menses.

169. Pregnancy.

170. Extra-uterine pregnancy.

171. Amniotic Dropsy.

172. Phantom Tumor.

173. Tumor or Abscess of Liver.

174 " " Spleen.

175. " " Kidney.

176. Floating Kidney.

177. Hydatids in Peritoneal Cavity.

178. Limited Peritoneal accumulation.

179. Sub-peritoneal cysts.

180. Tumor, other than above, in Abdominal Cavity.

181. Development, distension or displacement of abdominal viscera.

182. Fœcal impaction.

183. Tumor of Uterus (Fibroid, Fibrocystic or Malignant).

184. Cysts of Broad Ligament.

185. Tubal Dropsy.

186. Cystic disease in other parts of abdomen.

187. Tumor of Ovary.

188. Cystic, Fibrous or Fibrocystic.

189. Cancerous or tubercular degeneration of Ovary.

190. Dermoid Cysts of Ovary.

191. Is the cyst single, or are there few or many cysts?

192. Is the pedicle long or short?

193. Adhesions.

194. Rupture of cyst.

195. Hæmorrhage within cyst.

196. Inflammation of cyst.

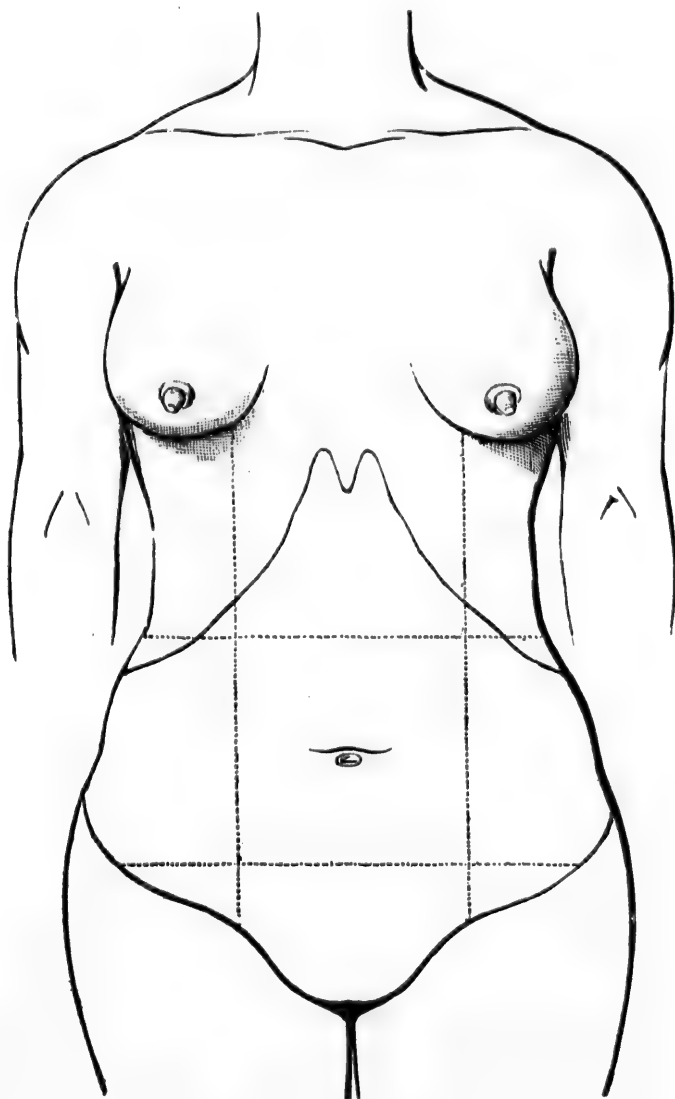
197. Peritonitis. $\left\{ \begin{array}{l} \text{Acute.} \\ \text{Chronic.} \end{array} \right.$

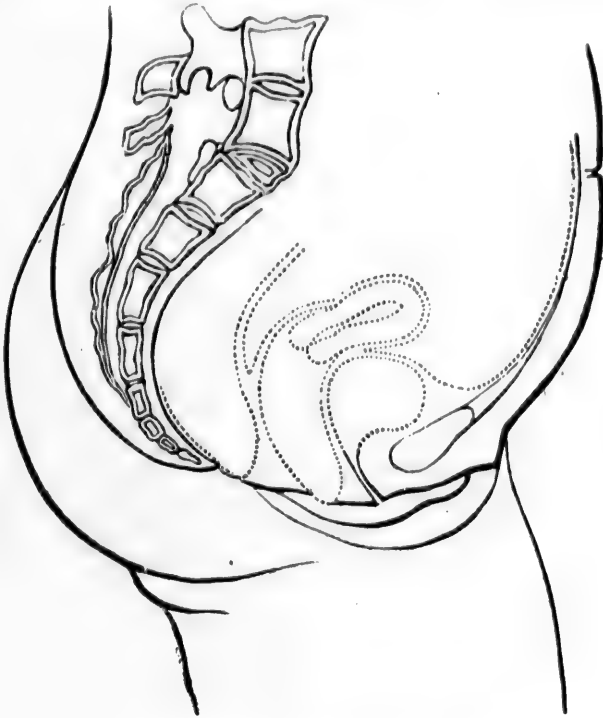
198. Name of this variety of Tumor, and of organ involved.

PROGNOSIS.

199. Probable duration of life if left alone.

200. Probability of recovery if operated upon.





TREATMENT RECOMMENDED.

OPERATION.

201. Date.

202. Where performed.

203. Assistants.

204. Visitors present.

205. Anæsthetic.

Administered by

206. Chief nurse's name.

207. Incision, situation.

208. “ length.

209. Ascitic fluid.

210. Adhesions, where.

211. Removal of Tumor or

212. Tapping.

213. Contents of cyst.

214. Physical character.

215. Chemical “

216. Microscopical “

217. Hæmorrhage. Quantity.

218. Chief source.

219. How arrested.

Pedicle:

220. Long or short.

221. Broad or narrow.

222. How secured.

223. Opposite ovary, condition of

224. Uterus, condition of

225. Relation to tumor.

226. Wound, how closed.

227. Peculiarities of operation.

228. Description of tumor.

229. Quantity of fluid removed.

230. Weight of cyst walls and solid matter.

231. Combined weight.

232. Condition found during operation compared with previous diagnosis.

AFTER TREATMENT, PROGRESS, &c.

DATE.	HOURS.	PULSE.	TEMPERATURE.			CONDITION.	REMEDIES.	INGESTA.	EGESTA.
			Mouth	Axilla	Vag.				
	3 P.M.								
	6								
	9								
	12								
	3 A.M.								
	6								
	9								
	12								

AFTER TREATMENT, PROGRESS, &c.

DATE.	HOURS.	PULSE.	TEMPERATURE.			CONDITION.	REMEDIES.	INGESTA.	EGESTA.
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	6								
	9								
	12								

AFTER TREATMENT, PROGRESS, &c.

DATE.	HOURS.	PULSE.	TEMPERATURE.			CONDITION.	REMEDIES.	INGESTA.	EGESTA.
			Mouth	Axilla	Vag. Rect.				
	3 P.M.								
	6								
	9								
	12								
	3 A.M.								
	6								
	9								
	12								

AFTER TREATMENT, PROGRESS, &c.

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AFTER TREATMENT, PROGRESS, &c.

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